



CITY OF BURIEN
400 SW 152nd St., Suite 300
Burien, WA 98166

Phone: (206) 241-4647
Fax: (206) 248-5539

IMPORTANT:

**Do Not
Ignore
This Form**

TAX IDENTIFICATION NUMBER (TIN) REQUEST

In order for you to receive reimbursement from the City of Burien, we must have either a **Tax Identification Number or a Social Security Number**. The Internal Revenue Code requires a Form 1099 for payments to every person or organization other than a corporation for services performed in the course of trade or business. Further, the law requires us to withhold 20% on reportable amounts paid to unincorporated persons who have not supplied us with their correct Tax Identification Number or Social Security Number.

Please complete this form and return it to the City of Burien within 30 days from the receipt of this form or before or along with the submittal of your first billing voucher/invoice.

Please check the appropriate category:

☐ Corporation ☐ Partnership ☐ Government Agency

☐ Individual/Proprietor Other (please explain) _____

Exempt From Backup Withholding (please explain) _____

TIN#: _ _ - _ _ _ _ _ _ _

SS#: _ _ - _ - _ _ _ _ _

Doing Business As: _____

Print Title: _____

Print Name: _____

Business Address: _____

Business Phone: _____

Date

Authorized Signature (required)